

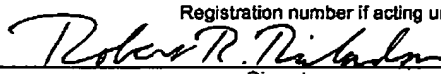
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PTO/SB/22 (12-04)

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|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|---------------------------------------------------|------------------|
| PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2005 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).) | | Docket Number (Optional) BA1-02-0395 (02-0395) | |
| Application Number 10/607,947-Conf. #3077 | | Filed June 27, 2003 | |
| For COMPOSITE BRIDGE EXPANSION JOINT | | | |
| Art Unit 3671 | | Examiner A. K. Pechhold | |
| This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. The requested extension and fee are as follows (check time period desired and enter the appropriate fee below): | | | |
| <input type="checkbox"/> | One month (37 CFR 1.17(a)(1)) | Fee | Small Entity Fee |
| <input type="checkbox"/> | Two months (37 CFR 1.17(a)(2)) | \$120 | \$80 |
| <input checked="" type="checkbox"/> | Three months (37 CFR 1.17(a)(3)) | \$450 | \$225 |
| <input type="checkbox"/> | Four months (37 CFR 1.17(a)(4)) | \$1020 | \$510 |
| <input type="checkbox"/> | Five months (37 CFR 1.17(a)(5)) | \$1590 | \$795 |
| <input type="checkbox"/> | | \$2160 | \$1080 |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. | | | |
| <input type="checkbox"/> A check in the amount of the fee is enclosed. | | | |
| <input checked="" type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. | | | |
| <input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. | | | |
| <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>503048</u> . I have enclosed a duplicate copy of this sheet. | | | |
| I am the <input type="checkbox"/> applicant/inventor. | | | |
| <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). | | | |
| <input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>40,143</u> | | | |
| <input type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 _____ | | | |
|  Signature | | <u>November 15, 2005</u> Date | |
| <u>Robert R. Richardson</u> Typed or printed name | | <u>(360) 692-0626</u> Telephone Number | |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. | | | |
| <input type="checkbox"/> Total of <u>1</u> forms are submitted. | | | |

I hereby certify that this correspondence is being facsimile transmitted to the Patent and Trademark Office, facsimile no. (571) 273-8300, on the date shown below.

Dated: 11/15/05Signature: Robert R. Richardson (Robert R. Richardson)